

Recording Requested By:  
WASHINGTON MUTUAL

STATE MS.-DESOTO CO. *A*  
FILED

When Recorded Return To:

APR 5 10 13 AM '02

NED SABBATINI SR.  
3454 HOURGLASS DRIVE WEST  
HERNANDO, MS 38632-6684

BK 1485 PG 403  
W.E. DAVIS CH. CLK.



## Deed of Release

Washington Mutual - Wisconsin #:1000275727 "SABBATINI SR." Lender ID:04192/1676279317 De Soto, Mississippi  
MERS #: 100023810000755531 VRU #: 1-888-679-6377

**Document Prepared By:**

Document Prepared By: Michael L. Townsend, WASHINGTON MUTUAL BANK, F.A. 11200 WEST PARKLAND AVE, MILWAUKEE, WI 53224 414-359-9300

33224 414-359-9300  
KNOW ALL MEN BY THESE PRESENTS that MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC. holder of a certain Deed of Trust, whose parties, dates and recording information are below, does hereby acknowledge that it has received full payment and satisfaction of the same, and in consideration thereof, does hereby Cancel, Discharge and Reconvey said Deed of Trust, and the estate, title and interest now held by it under said Deed of Trust without warranty, to the person legally entitled thereto.

Original Trustor: NED SABBATINI SR. AND ROSEMARY M. SABBATINI  
Original Beneficiary: FLEET NATIONAL BANK A NATIONALLY CHARTERED BANK  
Original Trustee: J. GARY MASSEY

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Date: 02/23/2001 Recorded on 03/13/2001 as in Book/Reel/Liber: 1299 Page/Folio: 0726 as Instrument  
No.: N/A

In the Records of the County Recorder of De Soto Mississippi

Property Address: 3454 HOURGLASS DRIVE WEST, HERNANDO, MS 38632

IN WITNESS WHEREOF, the undersigned, by the officer duly authorized, has duly executed the foregoing instrument.

On March 23rd, 2002  
MORTGAGE ELECTRONIC REGISTRATION SYSTEMS, INC.

By: Deana Friedel  
DEANA FRIEDEL, Assistant Secretary

STATE OF Wisconsin  
COUNTY OF Milwaukee

On March 23rd, 2002, before me, GALINA SHKLOVER, a Notary Public in and for Milwaukee County, in the State of Wisconsin, personally appeared DEANA FRIEDEL, Assistant Secretary, personally known to me (or proved to me on the basis of satisfactory evidence) to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity, and that by his/her/their signature on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

WITNESS my hand and official seal,

GALINA SHKLOVER  
Notary Expires: 01/15/2006

**GALINA SHKLOVER**  
**NOTARY PUBLIC STATE OF WISCONSIN**

WASHINGTON MUTUAL BANK, F.A., 11200 WEST PARKLAND AVE, MILWAUKEE, WI 53224

(This area for notarial seal)